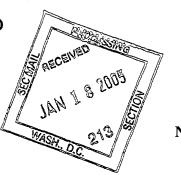
FORM D





05002059

1MISSION

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

13/4999

OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2005

Estimated average burden hours per response 16.00

| | SEC US | E ONLY |
|--------|---------|--------|
| Prefix | | Serial |
| | | L. |
| | DATE RE | CEIVED |
| | - | |

| Name of Offering (check if this is an amendment and name has changed, and indicate change.) | |
|---|--|
| Membership Interests | _ |
| Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ | Section 4(6) ULOE DEOCESSED |
| Type of Filing: ☐ New Filing ☐ Amendment | L. A. W. C. |
| A. BASIC IDENTIFICATION DA | TA 1AN 2 4 2005 |
| 1. Enter the information requested about the issuer | |
| Name of Issuer (check if this is an amendment and name has changed, and indicate change.) | THOMSON |
| Iron Gate Management, LLC | J'hoivison J'financial |
| Address of Executive Offices (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| 1400 16 th Street, Suite 220, Denver, CO 80202 | (303) 506-4562 |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| (if different from Executive Offices) | Same |
| Same | Same |
| Brief Description of Business | |
| Management of private equity investments | |
| Type of Business Organization | |
| ☐ corporation ☐ limited partnership, already formed ☐ other | er (please specify): limited liability company, already formed |
| ☐ business trust ☐ limited partnership, to be formed | · |
| Month Year | 71 |
| | Actual Estimated |
| Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for | State: CO |
| CN for Canada; FN for other foreign jurisdiction) | CO |

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

| 2. Enter the information r | equested for the follo | wing: | | | | |
|-----------------------------|---------------------------|--------------------------------|---------------------------|----------------------|--------------------------------------|-------------|
| Each promoter of th | e issuer, if the issuer l | nas been organized within the | past five years; | | | |
| | | - · | | | ss of equity securities of the issue | ť; |
| | | porate issuers and of corporat | e general and managing pa | irtners of partnersh | ip issuers; and | |
| Each general and ma | anaging partner of par | tnership issuers. | | | | |
| Check Boxes that Apply: | ☐ Promoter | ⊠ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☑ General and/or Managing Partner | |
| Full Name (Last name first, | if individual) | | | | | |
| Robert Cohen | | | · | | | |
| Business or Residence Addr | ess (Number and Stre | et, City, State, Zip Code) | | | | |
| 1400 16th Stree | t, Suite 220, Denve | r, CO 80202 | | | | |
| Check Boxes that Apply: | Promoter | ⊠ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☐ General and/or Managing Partner | |
| Full Name (Last name first, | if individual) | | | | | |
| Stephen G. Mc | Conahey | | | | | |
| Business or Residence Addr | ess (Number and Stre | et, City, State, Zip Code) | | | | |
| 1400 16th Stree | t, Suite 220, Denve | er, CO 80202 | | | | |
| Check Boxes that Apply: | ☐ Promoter | ⊠ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☐ General and/or Managing Partner | |
| Full Name (Last name first, | if individual) | | | | | |
| Douglas J. Fah | oury | | | | | |
| Business or Residence Addr | ess (Number and Stre | et, City, State, Zip Code) | | | | |
| 1400 16th Stree | t, Suite 220, Denve | er, CO 80202 | | | | |
| Check Boxes that Apply: | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or Managing Partner | |
| Full Name (Last name first, | if individual) | | | | | |
| , | , | | | | | |
| Business or Residence Addi | ress (Number and Stre | et, City, State, Zip Code) | | | | |
| Check Boxes that Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or Managing Partner | |
| Full Name (Last name first, | if individual) | | | | | |
| Business or Residence Add | ress (Number and Stre | eet, City, State, Zip Code) | | | 14.7 | |
| Check Boxes that Apply: | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | Director | General and/or Managing Partner | |
| Full Name (Last name first, | if individual) | | | | | |
| Business or Residence Add | ress (Number and Stre | eet, City, State, Zip Code) | | | | |
| Check Boxes that Apply: | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | Director | General and/or Managing Partner | |
| Full Name (Last name first, | if individual) | | | | | |
| Business or Residence Add | ress (Number and Stre | eet, City, State, Zip Code) | | | | |
| | | | | | | |

A. BASIC IDENTIFICATION DATA

| | | | | | В. | INFORM | ATION ABO | OUT OFFE | RING | | | | |
|-------|---|--|--|------------------------------|------------------------------|-------------------------------|-------------------------------|----------------------------------|----------------------------------|--|---|--------|--|
| 1. | Has the is | suer sold, or d | loes the issue | er intend to s | sell, to non- | accredited in | vestors in th | is offering?. | | | | Yes | No |
| | | | | Answer a | also in App | endix, Colur | nn 2, if filing | g under ULC | E. | | | | \boxtimes |
| 2. | What is th | e minimum ir | nvestment th | at will be ac | cepted fron | any individ | ual? | | | | | \$ N/A | |
| 3. | | Does the offering permit joint ownership of a single unit? | | | | | | | | | | Yes | No |
| | | | | | | | | | | | | | \boxtimes |
| 4. | similar rei associated dealer. If | nuneration fo person or ag | or solicitation ent of a brok ve (5) person: | of purchase er or dealer: | ers in conne registered v | ction with sa vith the SEC | iles of securi and/or with | ties in the of a state or sta | ffering. If a pates, list the na | ny commissio erson to be list ame of the bro t forth the info | ted is an ker or | | |
| Full | Name (Las | st name first, | if individual) |) | | | 21/4 | | | | | | |
| Buc | iness or Da | sidence Addre | ace (Number | and Street I | City State | 7in Code) | N/A | | | | | | |
| Dus | mess of Re | sidelice Addit | ess (Ivallibel | and Sirect, | city, State, | Zip Code) | | | | | | | |
| Nan | ne of Assoc | iated Broker | or Dealer | | | - | | | | | | | January . |
| | | | | | | | | | | | | | |
| Stat | es in Whicl | Person Liste | d Has Solici | ted or Intend | ls to Solicit | Purchasers* | | | | **** | , , <u>, , , , , , , , , , , , , , , , , </u> | (| |
| (Ch | eck "All St | ates" or check | cindividual S | States) | | | | ••••• | | | •••••• | [| All States |
| [AL | ıl | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| [IL] | - | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [M] | r <u>j</u> | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| [RI] | | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [VA] | [WV] | [WI] | [WY] | [PR] |
| Full | Name (La | st name first, | if individual |) | | | | | | | | - | |
| | | _ | | | | | | | | | | | |
| Bus | iness or Re | sidence Addr | ess (Number | and Street, | City, State, | Zip Code) | | | | | | | |
| NI | | iated Broker | an Danlar | | | | | | | | | | |
| INAII | HE OI ASSOC | iateu Diokei | of Dealer | | | | | | | | | | |
| Stat | es in Which | 1 Person Liste | d Has Solici | ted or Intend | ds to Solicit | Purchasers | | | | | | | |
| (Ch | eck "All St | ates" or check | c individual S | States) | | | | ••••• | | | · · · · · · · · · · · · · · · · · · · | [| All States |
| , | | | | , | | | | | | | | _ | _ |
| AL | .] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| [IL] | | [IN] | [lA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | |
| [M] | | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| [RI] | | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [VA] | [WV] | [WI] | [WY | [PR] |
| Full | Name (La | st name first, | if individual |) | | | | | | | | | |
| Bus | iness or Re | sidence Addr | ess (Number | and Street, | City, State, | Zip Code) | | | - | | | 1 | <u>. </u> |
| | C.A | . 15 1 | D 1 | | | | | | | | | | |
| Nar | ne of Assoc | iated Broker | or Dealer | | | | | | | | | | |
| Stat | es in Whic | h Person Liste | ed Has Solici | ited or Inten | ds to Solici | Purchasers | | | | | | | |
| (Ch | eck "All St | ates" or check | k individual : | States) | | ······ | | | | | | [| All States |
| [Al. | .] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| [IL] | | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [M] | rj | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| IRI | 1 | ISCI | ISDI | (TNI | (TX) | ITITI | IVTI | [VA] | IVAL | IWVI | fWII | IWY | I IPRI |

| | C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND | USE OF PROCEEDS | |
|----|---|-----------------------------|--------------------------------------|
| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. | | |
| | Type of Security | Aggregate Offering Price | Amount Already Sold |
| | Debt | \$ | \$ |
| | Equity | \$ | \$ |
| | ☐ Common ☐ Preferred | | |
| | Convertible Securities (including warrants) | \$ | \$ |
| | Partnership Interests | \$ | \$ |
| | Other (Specify Membership Interests) | \$40,100 | \$40,100 |
| | Total | \$40,100 | \$40,100 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | | A |
| | | Number Investors | Aggregate Dollar Amount of Purchases |
| | Accredited Investors | 3 | \$40,100 |
| | Non-accredited Investors | 0 | \$0 |
| | Total (for filings under Rule 504 only) | | \$ |
| | Answer also in Appendix, Column 4, if filing under ULOE. | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. | | |
| | | Type of Security | Dollar Amount Sold |
| | Town of Official | 55522.55 | 5075 |
| | Type of Offering Rule 505 | | \$ |
| | Regulation A | | \$ \$ |
| | Rule 504 | | · \$ |
| | Total | | \$ |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | <u> </u> |
| | Transfer Agent's Fees | | \$ |
| | Printing and Engraving Costs | | \$ |
| | Legal Fees | | \$5,000 |
| | Accounting Fees | _ | \$ |
| | Engineering Fees | | \$ |
| , | Sales Commissions (specify finders' fees separately) | | \$ |
| | Finders' Fees | | \$ |
| | | | |
| | Other Expenses (Identify) | | \$ |

5,000

 \boxtimes

| | | |
|--|---|----------------------|
| C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENS b. Enter the difference between the aggregate offering price given in response to Part C | · · · · · · · · · · · · · · · · · · · | \$ 35,100 |
| furnished in response to Part C – Question 4.a. This difference is the "adjusted gross proceed | | |
| 5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to shown. If the amount for any purpose is not known, furnish an estimate and check the box total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in above. | x to the left of the estimate. The | |
| | Payment to Officers, Directors, & Affiliates | Payment To Others |
| Salaries and fees | | □ \$ |
| Purchase of real estate | | □ s |
| Purchase, rental or leasing and installation of machinery and equipment | S | □ \$ |
| Construction or leasing of plant buildings and facilities | | □ \$ |
| Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) | | □ s |
| Repayment of indebtedness | | □ \$ |
| Working capital | 5 | ⊠ \$ <u>35,100</u> |
| Other (specify): | S | □ \$ |
| | en e | |
| | <u> </u> | □ s |
| Column Totals. | | ⊠ \$ <u>35,100</u> |
| Total Payments Listed (column totals added) | 🖂 🗴 s | 35,100 |
| D. FEDERAL SIGNATURE | | |
| The issuer had duly caused this notice to be signed by the undersigned duly authorized person. If this is an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written non-accredited investor pursuant to paragraph (b)(2) of Rule 502. | | |
| Issuer (Print or Type) Signature | | Date hadron hadron h |
| Iron Gate Management, LLC | W | January 13, 2005 |
| Name of Signer (Print or Type) Title of Signer (Print or Manage) Douglas J. Fahoury | | |
| | | |
| | | |

ATTENTION

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| | E. STATE SIGNATURE | | |
|------|--|--|-------------------|
| I. | Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? | Yes | No |
| | | | \boxtimes |
| | See Appendix, Column 5, for state response. | | |
| 2. | The undersigned issuer hereby undertakes to furnish to the state administrator of any state in which the notice is filed, a notice on Form D (I times as required by state law. | 7 CFR 239.50 | 0) at such |
| 3. | The undersigned issuer hereby undertakes to furnish to any state administrators, upon written request, information furnished by the issuer to | offerees. | |
| 4. | The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of conditions have been satisfied. | Offering Exemples the stablishing the stablish | otion at these |
| | e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersignes on. | d duly authoriz | zed |
| Issı | per (Print or Type) Signature Dat | е | |
| | Iron Gate Management, LLC | uary 13, 200 | 5 |
| Nar | ne of Signer (Print or Type) Aitle of Signer (Print or Type) | | |
| | Douglas J. Fahoury Manager | | |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

| | | | | APPENI | DIX | | | | · |
|-------|--------------------------------|--|--|--------------------------------------|--|--|--------|-----|----|
| 1 | Intend to non-a investor | to sell ccredited s in State -Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | | Type of investor and amount purchased in State (Part C-Item 2) | | | | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| AL | | | | | | | | | |
| AK | | | | | | | | | |
| AZ | | | | | | | | | |
| AR | <u> </u> | | | | | | | | |
| CA | | | 7/ | | · | | | | |
| со | | x | Membership Interest; \$40,100 | 3 | \$40,100 | 0 | 0 | | x |
| СТ | | | | | | | | "- | |
| DE | | | | | | | | | |
| DC | | | | | | | | | |
| FL | | | | | | | | | |
| GA | | | | | | | | | |
| НІ | | | | | | | | | |
| ID | | | | | | | | | |
| IL | | | | | | | | | |
| ĪN | | | | | | | | | |
| IA | | | | | | | | | |
| KS | | | | | | | | | |
| KY | | | | | | | | | |
| LA | | | | | | | | | |
| ME | | | | 7 | | | | | |
| MD | | | | | | | | | |
| MA | | | | | | | | | |
| Ml | | | | | | | | | |
| MN | | | | | | | | | |
| MS | | | | | | | | | |
| МО | | | <u> </u> | | | | | | |
| MT | | | | | | | | | |
| NE | | | | | | | | | |

| <u> </u> | | | | APPEN | DIX | | | <u> </u> | |
|----------|--------------------------------|--|--|--------------------------------------|--------|--|--------|----------|----|
| 1 | Intend to non-a investor | I to sell ccredited s in State -Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | | 4 | | | | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| NV | | | | | | | | | |
| NH | | | | , | | ` | | | |
| NJ | | , | | | | | | | |
| NM | | | | | | | | | |
| NY | | | | | | | | | |
| NC | | | | | | | | | |
| ND | | | | | _ | | | | |
| ОН | | | | | | | | | |
| OK | | | | | | | | | |
| OR | | | | | | | | | |
| PA | | | | | | | | | |
| RI | | | | | | | | | |
| SC | | | | | | | | | |
| SD | | | | | | | | | · |
| TN | | | | | | | | | |
| TX | | | | | | | , | | |
| UT | | | | | | | | | |
| VT | | | | | | | | | |
| VA | | | | | | | | | |
| WA | | | | | | | | | |
| wv | | | | | | | | | |
| Wi | | | | | | | | | |
| WY | | | | | | | | | |
| PR | | | | | | | | | |